

DECLARATION AND POWER OF ATTORNEY FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63) <input type="checkbox"/> Declaration Submitted with Initial Filing OR <input type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)	Attorney Docket Number	ITT0039YP
	First Named Inventor	Salvatore Avolio
	COMPLETE IF KNOWN	
	Application Number	
	Filing Date	
	Group Art Unit	
	Examiner Name	

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Pyrimidinone viral polymerase inhibitors

(Title of the Invention)

the specification of which

☒ bears the Attorney Docket Number and Title of the Invention noted above

☐ OR

☐ is attached hereto

☒ OR

☒ was filed on (MM/DD/YYYY) 01/15/2003 as United States Application Number or PCT International Application Number PCT/GB03/00124 and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose to the Patent and Trademark Office all information known to me to be material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent or inventor's certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate(s), or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Attorney Docket Number	Priority Claimed? YES NO
0201179.9	Great Britain	01/18/2002	ITT0039PV	<input checked="" type="checkbox"/> <input type="checkbox"/>
PCT/GB03/00124	Great Britain	01/15/2003	ITT0039Y	<input checked="" type="checkbox"/> <input type="checkbox"/>
				<input type="checkbox"/> <input type="checkbox"/>
				<input type="checkbox"/> <input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	Attorney Docket Number

DECLARATION AND POWER OF ATTORNEY for Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information known to me to be material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application or PCT Parent Application Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

As a named inventor, I hereby appoint, respectively and individually, as my attorney(s) or agent(s) with full power of substitution and revocation, the following registered practitioner(s) to prosecute this application and to transact all business in the United States Patent and Trademark Office connected therewith:

☐ Practitioners Associated with the Customer Number

OR

☒ Registered practitioner(s) named below

Name	Registration Number	Name	Registration Number
Dr. K. R. Walton	32,951	Dr. M. Winokur	32,763

Direct all correspondence to: ☒ Customer Number

Name	Dr. K. R. Walton				
Address	Merck & Co., Inc. - Patent Department				
Address	P.O. Box 2000, RY60-30				
City	Rahway	State	NJ	ZIP	07065-0907
Country	USA	Telephone	(732)594-3462	Fax	(732)594-

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor: ☐ A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])

Family Name or Surname

Salvatore

Avolio

Inventor's Signature

S. Salvatore

Date

July 7th, 2004

Residence: City

Pomezia, Rome

State

Country

Italy

Citizenship

Italian

Mailing Address

Istituto di Ricerche di Biologia Molecolare P. Angeletti, Via Pontina KM 30.600

City

Pomezia, Rome

State

ZIP 00040

Country

ITALY

☒ Additional inventors are being named on the _____ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

DECLARATION AND POWER OF ATTORNEY

ADDITIONAL INVENTOR(S) Supplemental Sheet

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
2-0 Given Name (first and middle [if any])		Family Name or Surname					
Stefania		Colarusso					
Inventor's Signature	<i>Stefania Colarusso</i>					Date	July 7, 2004
Residence: City	Pomezia, Rome	State		Country	Italy	Citizenship	Italian
Mailing Address	Istituto di Ricerche di Biologia Molecolare P. Angeletti, Via Pontina KM 30.600						
City	Pomezia, Rome	State		ZIP	00040	Country	ITALY
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
3-0 Given Name (first and middle [if any])		Family Name or Surname					
Immacolata		Conte					
Inventor's Signature	<i>Immacolata Conte</i>					Date	July 7, 2004
Residence: City	Pomezia, Rome	State		Country	Italy	Citizenship	Italian
Mailing Address	Istituto di Ricerche di Biologia Molecolare P. Angeletti, Via Pontina KM 30.600						
City	Pomezia, Rome	State		ZIP	00040	Country	ITALY
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
4-0 Given Name (first and middle [if any])		Family Name or Surname					
Steven		Harper					
Inventor's Signature	<i>Steven Harper</i>					Date	July 7, 2004
Residence: City	Pomezia, Rome	State		Country	Italy	Citizenship	British
Mailing Address	Istituto di Ricerche di Biologia Molecolare P. Angeletti, Via Pontina KM 30.600						
City	Pomezia, Rome	State		ZIP	00040	Country	ITALY
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
5-0 Given Name (first and middle [if any])		Family Name or Surname					
Uwe		Koch					
Inventor's Signature	<i>Uwe Koch</i>					Date	July 7, 2004
Residence: City	Pomezia, Rome	State		Country	Italy	Citizenship	German
Mailing Address	Istituto di Ricerche di Biologia Molecolare P. Angeletti, Via Pontina KM 30.600						
City	Pomezia, Rome	State		ZIP	00040	Country	ITALY

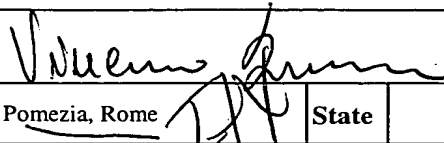
DECLARATION AND POWER OF ATTORNEY

ADDITIONAL INVENTOR(S) Supplemental Sheet

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])		Family Name or Surname					
Savina		Malancona					
Inventor's Signature	<i>Savina Malancona</i>					Date	Jul 7, 2004
Residence: City	Pomezia, Rome	State		Country	Italy	Citizenship	Italian
Mailing Address	Istituto di Ricerche di Biologia Molecolare P. Angeletti, Via Pontina KM 30.600						
City	Pomezia, Rome	State		ZIP	00040	Country	ITALY
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])		Family Name or Surname					
Victor Giulio		Matassa					
Inventor's Signature						Date	
Residence: City	Hirschberg	State		Country	Germany	Citizenship	British
Mailing Address	Istituto di Ricerche di Biologia Molecolare P. Angeletti, Via Pontina KM 30.600						
City	Pomezia, Rome	State		ZIP	00040	Country	ITALY
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])		Family Name or Surname					
Frank		Narjes					
Inventor's Signature	<i>Frank Narjes</i>					Date	Jul 7, 2004
Residence: City	Pomezia, Rome	State		Country	Italy	Citizenship	German
Mailing Address	Istituto di Ricerche di Biologia Molecolare P. Angeletti, Via Pontina KM 30.600						
City	Pomezia, Rome	State		ZIP	00040	Country	ITALY
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])		Family Name or Surname					
Alessia		Petrocchi					
Inventor's Signature	<i>Alessia Petrocchi</i>					Date	Jul 7, 2004
Residence: City	Pomezia, Rome	State		Country	Italy	Citizenship	Italian
Mailing Address	Istituto di Ricerche di Biologia Molecolare P. Angeletti, Via Pontina KM 30.600						
City	Pomezia, Rome	State		ZIP	00040	Country	ITALY

DECLARATION AND POWER OF ATTORNEY

**ADDITIONAL INVENTOR(S)
 Supplemental Sheet**

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor							
Given Name (first and middle [if any])		Family Name or Surname							
Vincenzo		Summa							
Inventor's Signature						Date	JULY 7, 2004		
Residence: City	Pomezia, Rome	State		Country	Italy	Citizenship	Italian		
Mailing Address	Istituto di Ricerche di Biologia Molecolare P. Angeletti, Via Pontina KM 30.600								
City	Pomezia, Rome	State		ZIP	00040	Country	ITALY		

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor							
Given Name (first and middle [if any])		Family Name or Surname							
Inventor's Signature						Date			
Residence: City		State		Country		Citizenship			
Mailing Address									
City		State		ZIP	00040	Country			

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor							
Given Name (first and middle [if any])		Family Name or Surname							
Inventor's Signature						Date			
Residence: City		State		Country		Citizenship			
Mailing Address									
City		State		ZIP	00040	Country			

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor							
Given Name (first and middle [if any])		Family Name or Surname							
Inventor's Signature						Date			
Residence: City		State		Country		Citizenship			
Mailing Address									
City		State		ZIP	00040	Country			